

PTO/SB/17 (12-04v2)
Approved for use through 07/31/2008, OMB 0851-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL
For FY 2005** Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 800.00)

Complete If Known	
Application Number	10/625,741
Filing Date	July 24, 2003
First Named Inventor	Rory M. Mitchell
Examiner Name	Shelley M. Soll
Art Unit	3725
Attorney Docket No.	ACE-17432

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JUN 20 2005**METHOD OF PAYMENT (check all that apply)**

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Deposit Account Name: Petraroia Langford Edwards & Rush				
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
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FEES CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Small Entity Fee Paid (\$)	Bronner Fee Paid (\$)	Fee Paid (\$)
	Fee (\$)	FCC (\$)	Fee (\$)	FCC (\$)	Fee (\$)	FCC (\$)			
Utility	300	150	500	250	200	100			
Design	200	100	100	50	130	65			
Plant	200	100	300	150	160	80			
Reissue	300	150	500	250	600	300			
Provisional	200	100	0	0	0	0			

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims:	Extra Claims	Fee (\$)	Fee Paid (\$)	Small Entity	
				Fee (\$)	Fee Paid (\$)
10	- 20 or HP =	x	=	50	25
HP = highest number of total claims paid for, if greater than 20.				200	100

Indep. Claims:	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	
				Fee (\$)	Fee Paid (\$)
7	- 3 or HP =	4	x 200 =	800.00	

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x		=

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge):

SUBMITTED BY	
Signature	Registration No. (Attorney/Agent) 40,288
Name (Print/Type) ANTONY C. EDWARDS	Telephone 250-861-5332
Date June 20, 2005	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to be (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Comptroller for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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BENSON EDWARDS LLP

Barristers & Solicitors • Patent & Trade-mark Agents

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FAX COVER PAGE

JUN 20 2005

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If you do not receive the number of pages specified below, please notify:

Michelle Hardy, Legal Assistant to

Mr. Antony Edwards

Telephone (250) 491-0206 Fax: (250) 491-0266
mhardy@bensonedwards.com

OUR FILE: ACE-17432

TO: USPTO - Art Unit 3725

FAX NO.: Examiner - Shelley M. Self
1-703-872-9306

FROM: Tony Edwards/Michelle Hardy

DATE: June 20, 2005

NUMBER OF PAGES (Including cover page): 30

STATUS OF ORIGINAL: Will NOT be sent.
 To follow by:
 mail courier

RE: United States Patent Application No. 10/625,741 filed July 24, 2003

Attached are a Transmittal Form (PTO/SB/21), Fee Transmittal, Credit card authorization and Response to the Office Action mailed March 18, 2005 for the above-noted US application.

200 - 270 Highway 33 West, Kelowna, BC V1X 1X7
TEL: (250) 491-0206 FAX: (250) 491-0266

PTO/SB/21 (08-04)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission **29**Application Number **10/625,741**Filing Date **July 24, 2003**First Named Inventor **Rory M. Mitchell et al.**Art Unit **3725**Examiner Name **Shelley M. Self**Attorney Docket Number **ACE-17432**

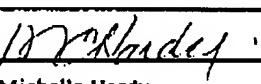
ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name			
Signature			
Printed name	ANTONY C. EDWARDS		
Date	June 20, 2005	Reg. No.	40,288

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature Typed or printed name **Michelle Hardy**Date **June 20, 2005**

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JUN 20 2005

Attorney Docket No. ACE-17432

IN THE UNITED STATES PATENT & TRADEMARK OFFICE

Patent Examining Operations

Patent Application

Applicants: **Rory M. Mitchell et al.**
Title: **Apparatus for Sawing a Workpiece**
Application No. **10/625,741**
Filed: **July 24, 2003**
Examiner: **Shelley M. Self** Art Unit: **3725**

To: Mail Stop Amendment
Director for Patents
Washington, D.C.
20231

Dear Sir:

RESPONSE

In response to the Office Action mailed March 18, 2005, kindly amend this application as follows: